

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Granite State Solutions

ADDRESS (number and street)

373 S Willow St #420

Check if different
than previously
reported. (ACC)

Manchester

NH

03103

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00580381

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15
Quarterly Report (Q1)☐ July 15
Quarterly Report (Q2)☐ October 15
Quarterly Report (Q3)☐ January 31
Year-End Report (YE)☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☒ Oct 20 (M10)☐ Jan 31 (YE)(c) 12-Day
PRE-Election
Report for the:☐ Primary (12P)☐ General (12G)☐ Runoff (12R)☐ Convention (12C)☐ Special (12S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the
State of(d) 30-Day
POST-Election
Report for the:☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Kilgore, Paul, , ,

Type or Print Name of Treasurer

Signature of Treasurer

Kilgore, Paul, , ,

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office
Use
Only**FEC FORM 3X**
Rev. 05/2016

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Granite State Solutions

Report Covering the Period:

From:

 M M / D D / Y Y Y Y Y
 09 / 01 / 2016

To:

 M M / D D / Y Y Y Y Y
 09 / 30 / 2016

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2016		535200.00
(b) Cash on Hand at Beginning of Reporting Period.....	1759480.60	
(c) Total Receipts (from Line 19)	7350000.00	13750000.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	9109480.60	14285200.00
7. Total Disbursements (from Line 31).....	7402747.33	12578466.73
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	1706733.27	1706733.27
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

Granite State Solutions

Report Covering the Period:

From:

M M / D D / Y Y Y Y Y
09 / 01 / 2016

To:

M M / D D / Y Y Y Y Y
09 / 30 / 2016
I. Receipts
COLUMN A
Total This Period
COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

50000.00

1650000.00

(ii) Unitemized

0.00

0.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

50000.00

1650000.00

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

7300000.00

12100000.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5)

7350000.00

13750000.00

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3)

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),

12, 13, 14, 15, 16, 17, and 18(c))

7350000.00

13750000.00

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)

7350000.00

13750000.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	3816.85	6711.85
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	3816.85	6711.85
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	7398930.48	12571754.88
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	7402747.33	12578466.73
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	7402747.33	12578466.73

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	7350000.00	13750000.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	7350000.00	13750000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	3816.85	6711.85
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	3816.85	6711.85

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 13

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Granite State Solutions

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Custom Management Services, Inc.

Mailing Address 206 W 14th St

City
Sioux FallsState
SDZip Code
57104FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 28 / 2016

Transaction ID : SA11AI.4173

Amount of Each Receipt this Period

50000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

50000.00

50000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 7 OF 13

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Granite State Solutions

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SENATE LEADERSHIP FUND

Mailing Address 45 NORTH HILL DRIVE STE 100

City
WARRENTON

State
VA

Zip Code
20186

FEC ID number of contributing
federal political committee.

C C00571703

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

9600000.00

Date of Receipt

09 / **14** / **2016**

Transaction ID : SA11C.4160

Amount of Each Receipt this Period

4800000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SENATE LEADERSHIP FUND

Mailing Address 45 NORTH HILL DRIVE STE 100

City
WARRENTON

State
VA

Zip Code
20186

FEC ID number of contributing
federal political committee.

C C00571703

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

12100000.00

Date of Receipt

09 / **26** / **2016**

Transaction ID : SA11C.4181

Amount of Each Receipt this Period

2500000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

7300000.00

7300000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 8 OF 13

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Granite State Solutions

Full Name (Last, First, Middle Initial)

A. Arena Online

Mailing Address 1780 West Sequoia Vista Cir

City
Salt Lake CityState
UTZip Code
84104Purpose of Disbursement
PAC Email Subscription

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		19		2016

FEC Identification Number

C**Transaction ID : SB21B.4165**

Amount of Each Disbursement this Period

225.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Holtzman Vogel Josefiak

Mailing Address 45 North Hill Dr Ste 100

City
WarrentonState
VAZip Code
20186Purpose of Disbursement
PAC Legal Fees

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

FEC Identification Number

C**Transaction ID : SB21B.4182**

Amount of Each Disbursement this Period

243.75

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Professional Data Services

Mailing Address 824 S Milledge Ave Ste 101

City
AthensState
GAZip Code
30605Purpose of Disbursement
PAC Compliance Consulting

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		07		2016

FEC Identification Number

C**Transaction ID : SB21B.4148**

Amount of Each Disbursement this Period

3051.10

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

3519.85

3519.85

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 9 OF 13
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Granite State Solutions			FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00580381 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y				
Full Name of Payee <input type="checkbox"/> Memo Item FP1 Strategies, LLC			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 13 / 2016	
Mailing Address PO Box 16504			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">12125.00</div>	
City Alexandria	State VA	Zip Code 22302	Transaction ID : SE.4154 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 13 / 2016	
Purpose of Expenditure Media Production		Category/ Type 004		
Name of Federal Candidate: HASSAN, MARGARET WOOD, , ,			Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NH <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5273637.02			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <input type="checkbox"/> Memo Item FP1 Strategies, LLC			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 20 / 2016	
Mailing Address PO Box 16504			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">15430.00</div>	
City Alexandria	State VA	Zip Code 22302	Transaction ID : SE.4166 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 20 / 2016	
Purpose of Expenditure Radio Advertising and Production		Category/ Type 004		
Name of Federal Candidate: HASSAN, MARGARET WOOD, , ,			Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NH <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5118090.24			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures			<div style="border: 1px solid black; padding: 2px; display: inline-block;">27555.00</div>	
(a) SUBTOTAL of Unitemized Independent Expenditures			<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
(a) TOTAL Independent Expenditures			<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature <u>Kilgore, Paul, , ,</u>			Date M M / D D / Y Y Y Y Y Y 10 / 20 / 2016	
<i>[Electronically Filed]</i>				

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 10 OF 13
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Granite State Solutions				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00580381 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report ▶ New report Amends report filed on MM / DD / YYYY					
Full Name of Payee <input type="checkbox"/> Memo Item FP1 Strategies, LLC				Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 27 / 2016	
Mailing Address PO Box 16504				Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">15895.00</div>	
City Alexandria		State VA		Zip Code 22302	
Purpose of Expenditure Additional Media Production				Category/Type 004	
Name of Federal Candidate: HASSAN, MARGARET WOOD, , ,				Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NH	
Calendar Year-To-Date Per Election for Office Sought 5276527.24				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <input type="checkbox"/> Memo Item Main Street Media Group				Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 20 / 2016	
Mailing Address PO Box 25093				Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">5102660.24</div>	
City Alexandria		State VA		Zip Code 22313	
Purpose of Expenditure Media Buy				Category/Type 004	
Name of Federal Candidate: HASSAN, MARGARET WOOD, , ,				Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NH	
Calendar Year-To-Date Per Election for Office Sought 5102660.24				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
<div style="display: flex; justify-content: space-between;"> <div> (a) SUBTOTAL of Itemized Independent Expenditures (a) SUBTOTAL of Unitemized Independent Expenditures (a) TOTAL Independent Expenditures </div> <div style="text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;">5118555.24</div> <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div> <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div> </div> </div>					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>Kilgore, Paul, , ,</u>				Date MM / DD / YYYY 10 / 20 / 2016	

[Electronically Filed]

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 11 OF 13
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Granite State Solutions				FEC IDENTIFICATION NUMBER ▼ C C00580381	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>					
Full Name of Payee <input type="checkbox"/> Memo Item Main Street Media Group				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address PO Box 25093				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1967736.04</div>	
City Alexandria		State VA		Zip Code 22313	
Purpose of Expenditure Media Buy				Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>	
Name of Federal Candidate: HASSAN, MARGARET WOOD, , , <div style="display: flex; justify-content: flex-end; align-items: center;"> <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose </div>				Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NH	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">7244263.28</div>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <input type="checkbox"/> Memo Item RSM				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address 1702 E Highland Ave Ste 408				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">2000.00</div>	
City Phoenix		State AZ		Zip Code 85016	
Purpose of Expenditure Media Production				Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>	
Name of Federal Candidate: HASSAN, MARGARET WOOD, , , <div style="display: flex; justify-content: flex-end; align-items: center;"> <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose </div>				Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NH	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">5174824.40</div>				Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <p>(a) SUBTOTAL of Itemized Independent Expenditures</p> <p>(a) SUBTOTAL of Unitemized Independent Expenditures</p> <p>(a) TOTAL Independent Expenditures</p> </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; text-align: right; margin-bottom: 10px;">1969736.04</div> <div style="border: 1px solid black; padding: 2px; text-align: right; margin-bottom: 10px;"></div> <div style="border: 1px solid black; padding: 2px; text-align: right;"></div> </div> </div>					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>Kilgore, Paul, , ,</u>				Date <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	

[Electronically Filed]

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 12 OF 13
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Granite State Solutions			FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00580381 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>				
Full Name of Payee RSM <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">09</div> <div style="border: 1px solid black; padding: 2px;">21</div> <div style="border: 1px solid black; padding: 2px;">2016</div> </div>	
Mailing Address 1702 E Highland Ave Ste 408			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%;"> 2000.00 </div>	
City Phoenix	State AZ	Zip Code 85016	Transaction ID : SE.4172 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">09</div> <div style="border: 1px solid black; padding: 2px;">22</div> <div style="border: 1px solid black; padding: 2px;">2016</div> </div>	
Purpose of Expenditure Video Production			Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate: HASSAN, MARGARET WOOD, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President District: 00 State: NH	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%;">5260632.24</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee Targeted Victory <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">09</div> <div style="border: 1px solid black; padding: 2px;">06</div> <div style="border: 1px solid black; padding: 2px;">2016</div> </div>	
Mailing Address 1033 North Fairfax St Ste 400			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%;"> 86687.62 </div>	
City Alexandria	State VA	Zip Code 22314	Transaction ID : SE.4146 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">09</div> <div style="border: 1px solid black; padding: 2px;">06</div> <div style="border: 1px solid black; padding: 2px;">2016</div> </div>	
Purpose of Expenditure Digital Advertising			Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate: HASSAN, MARGARET WOOD, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President District: 00 State: NH	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%;">5261512.02</div>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures			<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%;"> 88687.62 </div>	
(a) SUBTOTAL of Unitemized Independent Expenditures			<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%;"> 0 </div>	
(a) TOTAL Independent Expenditures			<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%;"> 88687.62 </div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature Kilgore, Paul, , ,			Date <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">20</div> <div style="border: 1px solid black; padding: 2px;">2016</div> </div>	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 13 OF 13
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Granite State Solutions			FEC IDENTIFICATION NUMBER ▼ C C00580381	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report			New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Targeted Victory <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 13 / 2016	
Mailing Address 1033 North Fairfax St Ste 400			Amount 53854.58	
City Alexandria	State VA	Zip Code 22314	Transaction ID : SE.4155	
Purpose of Expenditure Digital Advertising		Category/ Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 13 / 2016	
Name of Federal Candidate: HASSAN, MARGARET WOOD, , ,			Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NH <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5327491.60			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee Targeted Victory <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 20 / 2016	
Mailing Address 1033 North Fairfax St Ste 400			Amount 140542.00	
City Alexandria	State VA	Zip Code 22314	Transaction ID : SE.4170	
Purpose of Expenditure Digital Advertising		Category/ Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 20 / 2016	
Name of Federal Candidate: HASSAN, MARGARET WOOD, , ,			Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NH <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5258632.24			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures			194396.58	
(a) SUBTOTAL of Unitemized Independent Expenditures				
(a) TOTAL Independent Expenditures			7398930.48	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Kilgore, Paul, , , Signature			Date M M / D D / Y Y Y Y Y Y 10 / 20 / 2016	

[Electronically Filed]